



Sustainable Management Development Program
Office of Capacity Development and Program Coordination
Coordinating Office for Global Health

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CDC Coordinating Office for Global Health
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Letter from the SMDP Director

Introduction

Enhancing Public Health Management Training Capacity

Delivering public health programs and services to those who need them requires not only technical expertise in such areas as medicine, nursing, and laboratory science, but also managerial skills to mobilize resources and deploy them effectively. The shortage of basic managerial skills among public health personnel is perhaps one of the most important barriers to the success of public health interventions in the developing world today. Several factors contribute to this shortage:

- Weak training infrastructure with few faculty trained in management science;
- Lack of emphasis on management skills in medical, nursing, laboratory, and other pre-service training curricula;
- Inadequate incentives to attract and retain competent individuals within the public health sector.

CDC's Response

Since 1992, CDC's Sustainable Management Development Program (SMDP) has worked with 61 developing countries and numerous public and private sector donors to strengthen management training capacity within Ministries of Health, non-governmental organizations (NGOs), and academic institutions. SMDP partners with Emory University and private sector faculty to offer each fall in Atlanta a 6-week Management for International Public Health (MIPH) training course for management trainers.

To date, SMDP has trained 293 trainers from 61 countries in the MIPH course. These trainers have provided in turn more than a half million person days of training collectively to more than 2,600 public health professionals. Specific programs that have benefited from improved management capacity include immunizations, tuberculosis, malaria, onchocerciasis, reproductive health, and HIV/AIDS.

Participants in the MIPH course come from a variety of organizational settings, including ministries of health, academia, NGOs, and training institutions. What they have in common is a mandate from their sponsors to return and train others. Typically, a country sends 2–3 trainers to the course each year over several years to form a core training team. The MIPH course is highly interactive and provides participants with practical tools they need to teach topics like planning, problem analysis, team building, and quality improvement. Each participant leaves Atlanta with a training plan that SMDP helps implement over 3–5 years.

In-country training usually consists of a series of short (1–2-week) workshops for local public health program managers, each of whom is required to complete an applied management learning project that is supervised by workshop faculty. At the end of each in-country training

cycle, local participants present results of these projects to an audience of their peers and senior managers to highlight accomplishments and share recommendations.

Accomplishments

To date, 293 graduates of the MIPH course work in 61 countries. These graduates have attended the MIPH course with financial support from 54 organizations (for a complete list, see Appendix C).

Sponsors of the 2005 MIPH participants include the Commonwealth Health Center, Northern Mariana Islands; the Global AIDS Program, U.S. Centers for Disease Control and Prevention; the Soros Foundation Open Society Institute; the U.S. Agency for International Development (USAID); Taiwan Department of Health; and the World Bank.

This report summarizes training activities undertaken by MIPH graduates in 18 countries during 2005. Collectively, these graduates taught 22 workshops attended by 540 participants, who then carried out more than 200 applied management improvement projects.

In 2005, SMDP provided technical support to capacity-building efforts in Botswana, Egypt, Guam, Kenya, Macedonia, Malawi, the Philippines, Saipan, Serbia, Taiwan, Thailand, Uganda, and the Vietnam Global AIDS and Tuberculosis Programs. Other countries included in this report carried out training based on MIPH but independent of SMDP assistance.

Several new initiatives gained momentum during 2005. SMDP worked with several programs to expand decentralized management training. In Vietnam, SMDP helped the Hanoi School of Public Health and the Global AIDS Program launch a decentralized training-of-trainers model that significantly strengthened in-country management training capacity. In addition to the Hanoi School of Public Health, the Preventive Medical Center in Danang and the Institute for Hygiene and Public Health in Ho Chi Minh City serve as public health management training centers for provincial HIV/AIDS program staff. Forty-four provincial HIV/AIDS program managers participated in the first regional training sessions in Danang and Ho Chi Minh City during 2005.

In the Philippines, the Field Management Training Program (FMTP) at the National Epidemiology Center (NEC) made further progress in decentralizing its management training program. With support from regional Center for Health Development Offices, two regional management training programs in Central Luzon and Bicol trained 38 local public health staff during 2005 with support from the FMTP. NEC and its partners also discussed plans to expand the decentralized training to Visayas, Luzon, and Mindanao during 2006.

In southern Africa, SMDP worked with BOTUSA and the Institute for Development Management (IDM) during 2005 on plans to expand regional capacity for public health management training to IDM's offices in Lesotho and Swaziland. Two IDM staff from Lesotho and Swaziland attended the 2005 MIPH course and will collaborate with IDM/Bostwana and SMDP to begin public health management training for HIV/AIDS program staff.

The final phase of SMDP's cooperation with the Open Society Institute to strengthen public health management training capacity in Southeastern Europe gathered momentum in 2005 with the graduation from MIPH of two faculty members of the Centre School of Public Health, School of Medicine, University of Belgrade. Thirty-two public health professionals from the regional Institutes of Public Health participated in a series of public health management training modules during 2005 with assistance from SMDP. Through the program, public health management training has become a core section of the continuing education curriculum in the Centre School of Public Health.

The work described in this report represents the efforts of many individuals, each of whom played an important role in helping to achieve a shared vision of providing high quality public health services, managed and led by competent, capable personnel. We thank them for their efforts, and pledge our continuing support.



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Management for International Public Health Course

Each year, an international group of mid-career public health professionals comes to Atlanta for the Management for International Public Health (MIPH) course, co-sponsored by the CDC Coordinating Office for Global Health's Sustainable Management Development Program (SMDP) and the Emory Rollins School of Public Health.

MIPH course participants are funded by bilateral or multilateral governmental agencies or by NGOs. Below are sponsors of the 2005 MIPH course participants:

- The CDC Global AIDS Program (GAP) sponsored medical doctors from Ethiopia, Vietnam and Zambia; nurses from Malawi and Mozambique; a laboratory manager from Uganda; trainers from Botswana, Lesotho, Swaziland and Uganda; a TB control officer from Malawi; and a data manager and communications director from Haiti.
- The Soros Foundation's Open Society Institute supported public health university faculty from Serbia and Montenegro and the Deputy Head of the WHO Country Office in the Republic of Macedonia.
- The Taiwan Ministry of Health sent two medical doctors with the Taiwan Field Epidemiology Training Program.
- USAID Mexico supported two medical doctors from the National Center of Epidemiological Surveillance and Disease Control in Mexico.
- The CDC Division of Epidemiology and Surveillance Capacity Development sponsored the director of Brazilian Field Epidemiology Training Program.
- The Commonwealth Health Center, Saipan sent a personnel specialist.
- CDC Thailand, through two agreements, supported a laboratory manager, an assistant professor, the Chief of Quality Assurance for the HIV Testing Section at the National Institute Health, and a Health Policy and Planning Analyst at the Ministry of Public Health.

Past donors include, among others, the Bill & Melinda Gates Foundation, the Aga Khan University, Save the Children, the World Bank, and the World Health Organization. Please see Appendix C for a list of MIPH donors from 1992–2005, and Appendix D for a list of MIPH graduates from the same period.

The MIPH course provides participants with practical skills they need to manage and lead effective public health organizations and to teach those skills to others. Training modules in 2005 included advocacy, conflict resolution, designing and delivering training, donor relations, leading organizational change, leadership, marketing, media relations, organizational excellence, presentation skills, program planning and project management, strategic communication, supervision, team building, and Total Quality Management (TQM). The MIPH course curriculum is based on a set of core competencies for public health managers which is described more fully on SMDP's website (<http://www.cdc.gov/smdp/corecomp.htm>).

After completing the MIPH course, graduates return to their countries to implement public health management training for public health professionals in a variety of institutions. One of the unique features of SMDP-affiliated training at the country level is a requirement for all local participants to complete an *applied management learning project* that helps translate classroom knowledge into the ability to solve real public health management problems in the workplace. During 2005, MIPH graduates trained 540 public health professionals who subsequently implemented more than 200 applied management projects to improve organizational performance.

The following pages summarize activities in 18 countries during 2005. Appendix A outlines SMDP's criteria for three levels of training program development and notes representative country programs at each level.

In-Country Training Program Results

Summary of SMDP In-Country Training Programs Jan-Dec 2005

Country	No. Managers Trained In-Country	Target Audiences for Training	Collaborating Institutions	No. Applied Management Learning Projects
Botswana	22	HIV/AIDS program managers	BOTUSA, Institute for Development Management, CDC Global AIDS Program (GAP)	18
Croatia	30	County public health officials	Andrija Stampar University, OSI Croatia	1
Egypt	32	Governorate Surveillance Unit Directors/FETP	Egypt FETP and CDC's Division of International Health	13
Guam	17	Nurses, public health employees	University of Guam	18
Haiti	0	Local HIV/AIDS program managers, data clerks and data managers	GAP Haiti	0
India	22	HIV/AIDS project managers, volunteers	Indian Network for People Living with HIV/AIDS (INP+), GAP India	0
Macedonia	20	Local and regional public health managers	Department of Social Medicine, University of St. Cyril and Methodius, FOSIM, Ministry of Health	3
Malawi	34	TB and HIV/AIDS program managers	GAP Malawi, National TB Programme, Malawi AIDS Counseling and Resource Organization, Infection Control Programme, Ministry of Health	9
Mexico	23	Ministry of Health middle managers	General Directorate of Epidemiology, Ministry of Health	2
Pakistan	14	Public health managers, NGO staff	Ministry of Health, Aga Khan University	not known
Philippines	84	Local and regional public health managers, lab managers	National Epidemiology Centers, FMTP, LMTP	42
Saipan CNMI	28	Hospital managers	Commonwealth Health Center, CNMI Department of Health	3
Serbia & Montenegro	32	Regional Institutes of Public Health, multisectoral teams	Centre School of Public Health, University of Belgrade, Open Society Institute	4
Taiwan	65	Tobacco control, regional and local public health managers	Bureau of Health Promotion	58
Thailand	24	Medical technologists	Thai National Institute of Health, Mahidol University, Thai-MOPH CDC Collaborative, MOPH, and GAP Thailand	5
Uganda	10	Public health managers, laboratory technicians and managers, public health graduate students	Institute of Public Health, Makerere University, GAP Uganda	10
Vietnam (HIV/AIDS)	70	HIV/AIDS program managers	Hanoi School of Public Health, GAP Vietnam	22
Vietnam (TB)	13	TB control managers	National TB Control Program, CDC Division of TB Elimination	13
Zambia	0	medical technologists, laboratory managers	Central Board of Health, Ministry of Health, GAP Zambia	0
Total # of managers trained:	540		Total # of applied management learning projects:	221

Country Summaries

Botswana

SMDP's partners in Botswana include BOTUSA, a collaborative effort between CDC-GAP and the government of Botswana to combat HIV/AIDS, and the Institute of Development Management (IDM), a regional organization that conducts training, consulting, and research in Botswana, Lesotho, and Swaziland. BOTUSA employs one MIPH graduate; IDM, five. BOTUSA, IDM, and SMDP are working together to strengthen the management skills of public health program managers and staff in Botswana.

Botswana	2005	Cumulative
MIPH graduates	1	8
Workshops	1	3
In-country trainees	22	56
Applied management learning projects	18	47



MIPH 2005 alumna Rose Choto, Institute of Development Management, carries out an exercise during Healthy Plan-it™ training in the annual MIPH course.

With BOTUSA sponsorship, IDM coordinated an initial 2-week Botswana management training workshop in Gaborone in June 2003. Fifteen HIV/AIDS program managers from various NGOs, community-based organizations, and governmental agencies learned about Total Quality Management (TQM), team building, leadership, Healthy Plan-it™, communication skills, patient flow analysis, and monitoring/evaluation. The participants then returned to their worksites and formed quality improvement teams to address HIV/AIDS-related problems. They presented their project results in November 2003 at the end of a final week-long workshop that also covered budgeting, marketing, and project management. In 2004, a second cohort of program managers proceeded through this management training cycle. Teams in the first two years completed 29 HIV/AIDS-related applied management learning projects.

In 2005, a third cohort of program managers was trained in management during a two-week workshop conducted primarily by IDM consultants and MIPH alumni with minimal assistance from SMDP. Participants included laboratory technologists, pharmaceutical technicians, social scientists, nursing practitioners, informatics specialists and NGO staff members. Participants implemented 18 applied management learning projects that improved organizational performance in such areas as decreasing patient waiting time for prescriptions at a hospital pharmacy, increasing the number of HIV counseling sessions held, improving

turnaround time for specimens in a hospital laboratory, improving sputum collection from tuberculosis patients, and improving adherence to treatment among mentally ill patients in a government hospital.

BOTUSA hired an independent consultant to conduct a mid-term evaluation of the training program to provide feedback to BOTUSA, IDM, and SMDP toward improving the Botswana management training course.

Specific evaluation recommendations included these:

- Increase the amount of time provided for teams to complete their applied management learning projects.
- Conduct a comprehensive summative impact study at some point in the future.
- Maintain the team-based problem-solving approach advocated in the management training program, “because it is in line with the consensus ethical culture of Batswana.”
- Establish the management training program as one of IDM's permanent in-service training programs.
- Conduct activities to encourage the program's sustainability, especially the following: a TQM refresher course for in-country course graduates; a dissemination seminar for stakeholders, senior management and political leaders; a refresher train-the-trainer workshop for facilitators and supervisors; and a workshop or consultancy to review and standardize teaching materials.
- Market the program widely in Botswana.



Standing: MIPH 2001 graduate Martin Mosima and Tebatso Paul ('04), both with IDM, consult with TQM workshop participants (seated) on a countermeasures matrix for an applied management learning project.

Croatia

Croatia	2005	Cumulative
MIPH graduates	0	6
Workshops	4	36
In-country trainees	30	203
Applied management learning projects	1	26

Collaboration between SMDP and Croatia's Andrija Stampar School of Public Health began when two faculty members attended the 2001 MIPH course, with financial support from the Open Society Institute (OSI) of the Soros Foundation.

OSI also supported two attendees per year at the course in 2002 and 2003, training a total of four graduates from the Stampar School and one each from the

Department of Health, Social Welfare, and Labor in Istria County and the General Hospital in Bjelovar.

At the end of 2001, County Governors and officials in the Ministry of Health, Ministry of Labor and Social Welfare, National Institute of Public Health, and the Andrija Stampar School of Public Health agreed to begin a management program for public health capacity building at the county level to be called "Health – Plan for It / Healthy Counties." Each county team attending the program comprised nine to 11 representatives: at least three from the political and executive component (County Councils and Departments for Health and Social Welfare), three to five from the technical component (County Institute of Public Health departments, County Hospitals, County Health Centers, Centers for Social Welfare, Elderly Persons Homes, Institutions for elderly or youth with special needs); and three from the community (NGOs, voluntary organizations, and the media). Because mutual learning and exchange of experience were important parts of the process, each training cohort consisted of representatives from three counties from different parts of Croatia with varying levels of local-governance experience. To maximize the participative nature of the workshops, the number of participants at any given training activity was limited to 30,

Each team completed a county plan that prioritized health needs and made recommendations for addressing them. The modular training was deemed successful when teams presented and publicly defended their County Health Profile and Plan before the public health academia. Representatives from the first three counties to complete the program presented their plans at a November 2002 conference in Krapinske Toplice that attracted local and national government officials as well as the media, including the Croatian National News Agency and Croatian regional television.

From March 2002 to the beginning of September 2004, five training cohorts (15 county teams, 153 participants) had completed the Healthy Counties program and produced County Health Profiles and County Health Plans with prioritized health needs and specific recommendations for addressing them. Because the City of Zagreb, as the largest city in Croatia, has county-level authority, the team from Zagreb completed a slightly modified, separate program, as a sixth cohort of 24 participants. As of this writing, teams from 16 of Croatia's 20 counties and the City of Zagreb have completed County Health Plans. In nine counties, County Councils accepted

and approved the county strategic health documents, and five of the councils allocated finances for project implementation in priority areas.

At the beginning of 2003, the “Health – Plan for it” training program was officially recognized as a postgraduate (continuing education, i.e., re-licensing) training course by the Medical School, University of Zagreb, and by the Croatian Medical and Dental Chamber.

Once the “Health – Plan for It” project had achieved its initial planning goal at the macro level, the MIPH graduates turned their attention to improving the efficiency and effectiveness of operations at the organizational level in hospitals, using Total Quality Management (TQM). Since 2002, Croatian MIPH course graduates have conducted one TQM workshop for 29 participants. Each team of participants completed one applied management learning project. One such project was presented at the 13th European Conference on Public Health, November 2005, and the results were published in a peer-reviewed journal as “Total Quality Management in Istrian County Hospital,” *Eur J Public Health*. 2005;15 (1 Supp):146. This project addressed breast cancer in the Istrian County Hospital. Other topics addressed using TQM have included emergency service organization (3 projects), data management (2 projects), and food control (1 project).

The Croatian management training program has received awards at two SMDP Global Conferences. The “Istria County Health Plan” won an applied management learning project award during SMDP’s Second Biennial Conference in Hanoi, Vietnam, March 2004. The Croatian management training program won SMDP’s “Management Training Excellence” award for 2004–2005. This award recognizes a public health management training program that best demonstrates the application of principles taught in the MIPH course.

Representatives of the Croatia Ministry of Health, Andrija Stampar School of Public Health, the National Institute for Public Health, and county officials participate in a panel discussion on the county public health plans that resulted from the “Health – Plan for It” project carried out in Istarska, Varazdinska, and Dubrovacko-Neretvanska counties in 2002.



Egypt

Egypt	2005	Cumulative
MIPH graduates	0	4
Workshops	1	2
In-country trainees	32	63
Applied management learning projects	13	13

In 1998, SMDP began working with the Egyptian Field Epidemiology Training program (FETP) within the Ministry of Health and Population (MOHP). Three FETP staff and a WHO regional advisor on women's health have completed SMDP's MIPH course.

The Egyptian FETP CDC's Division of International Health (DIH) invited SMDP to assist in conducting a 10-day management workshop February 19–March 2, 2005, in Cairo, Egypt, as one module of the Epidemiology and Surveillance Unit course for the Governorate Surveillance Unit (GSU) directors. To strengthen the management skills of the directors, the SMDP module focused on teambuilding, supervision, Force Field Analysis, designing and delivering effective classroom training, and TQM. USAID funded this workshop.

The 32 participants included 17 GSU directors, seven FETP trainees and five central-level FETP staff, two physicians from the Infection Control Program, and one physician from the National AIDS Control Program.

During the workshop, the GSU directors began work on applied management learning projects. Upon return to their worksites, they formed quality improvement teams to work on applied management learning projects based on themes they chose during the workshop. The teams' completed projects reported organizational improvement in such areas as reducing monthly report delays, eliminating duplication of National Egyptian Disease Surveillance System records, and improving the reporting rate at fever hospitals.

Guam

Collaboration with Guam began in 2000 when a health and nursing consultant from the University of Guam (UOG) Micronesia Health and Aging Studies attended the MIPH course. The second graduate, the Director of the UOG Center for Continuing Education and Outreach Programs, attended MIPH in 2003 with support from a grant to UOG from the World Health Organization (WHO). The first MIPH graduate recognized the opportunity to use MIPH course materials to strengthen regional public health management training capacity in the Pacific.

Association of Teachers of Preventive Medicine (ATPM) funds were used to establish a permanent UOG management training center named Health Leaders Achieving Today—Tomorrow's Excellence (HLATTE).

Since its inception, HLATTE has trained 223 local program managers in the Pacific Rim and generated an income of \$154,300 from training fees. An external consultant carried out an evaluation seminar for the program in December 2005. The report will be available in June 2006.

Guam	2005	Cumulative
MIPH graduates	1	3
Workshops	1	4
In-country trainees	17	82
Applied management learning projects	5	29

Training on Guam in 2005

HLATTE staff taught a management workshop on Guam for 17 nurses from eight Pacific jurisdictions in June 2005. This workshop was partially funded by the Pacific Islands Health Officers Association (PIHOA). Participants' applied management learning projects were supervised via distance-based technology after they returned home. Their projects addressed the following themes:

- Reduce nursing absenteeism (American Samoa and Chuuk)
- Increase the number of nurses who pass the competency test (Guam Memorial Hospital)
- Increase the number of home visits per nurse (Guam Department of Public Health & Social Services)
- Reduce the number of days required for orders to be approved and signed by a physician from >60 to <55 days (Guam Pacific Home Health)
- Reduce waiting time in the Family Care Clinic (Saipan)



Standing, from left: Maria Pangelinan (MIPH '02) from UOG/HLATTE assists Tina Santos (MIPH '04) in teaching a TQM workshop for 28 senior hospital managers on Saipan CNMI in March 2005. Seated, from left: Granya Shearer, Nursing Unit Manager, Hemodialysis; and Rose Sorensen, Collections Manager.

- Increase compliance with infection control policy (Pohnpei)
- Reduce infant mortality (Majuro)
- Reduce patient waiting time in the outpatient clinic (Palau).

Participants in the workshop for nurses were expected to complete their projects and graduate by April 2006.

Management Training in CNMI

HLATTE staff, in collaboration with two MIPH 2004 alumnae from the Commonwealth of the Northern Mariana Islands (CNMI), conducted a management training workshop for 28 senior hospital managers in Saipan's Commonwealth Health Center in March 2005. Three of nine teams completed their applied management learning projects and graduated in November; the other teams are expected to graduate in 2006. (See full Saipan CNMI report, pp. 25-27.)

Other Training

HLATTE conducted "Paradigm Shifts in Professional Leadership—Integrating English Instruction" for 21 visiting university allied health students from Taiwan in April 2005. HLATTE provided a Customer Service workshop for 120 case workers and supervisors from Guam's Department of Public Health and Social Services (DPHSS) in June, and in November HLATTE staff assisted the DPHSS Guam Diabetes Program in completing a Diabetes Systems Assessment and Strategic Plan—a requirement for CDC funding. There were 33 participants in this workshop, representing Public Health, Guam Memorial Hospital, Mental Health, the Department of Education, the Diabetes Association, consumers, policy makers, health professional retirees, and the University School of Nursing.

Conference Presentations in 2005

- First American Pacific Island Legislature (APIL) Health Council Forum in Hawaii, May 2005—Ms. Laurent Dueñas, HLATTE Director, presented "Regional Program to Strengthen Management and Leadership" at the request of the APIL president.
- Pacific Global Health Conference, Honolulu, HI, June 2005—Dr. Michael Malison, SMDP Director, and Ms. Maria Pangelinan, HLATTE Marketing Specialist, presented "Strengthening Management Training Capacity in the Pacific."
- 28th American Pacific Nursing Leaders Council Conference, Honolulu, HI, June 2005—Ms. Laurent Dueñas, HLATTE Director, and Ms. Kathleen Fritch, WHO Nurse Consultant, presented "Priority Setting and Decision Making."

- 40th Meeting, Pacific Island Health Officers Association (PIHOA), August 2005—Ms. Laurent Dueñas, HLATTE Director, presented “Management in Health Training for the American Pacific Nursing Leaders” and showcased an applied management learning project from Chuuk State Hospital.
- The U.S. Associated Pacific Island Comprehensive Cancer Control Leadership Institute and the Pacific Association of Clinical Trainers, March 2005—Ms. Laurent Dueñas, HLATTE Director, presented “Team Building, Priority Setting and Conflict Resolution” and facilitated the CNMI Comprehensive Cancer Control Planning team.

Future Plans

- Management workshops are planned for 2006 in Majuro, Saipan, and Pohnpei in collaboration with local health authorities and WHO.
- A train-the-trainer program is planned at the University of Guam to increase the number of management faculty.
- Other management training modules (e.g., stress management and time management) are being developed to meet local needs.
- HLATTE has obtained funding from the Office of the Governor of Guam to support the construction of a new 50-seat classroom adjacent to the existing HLATTE office to reduce training costs and potentially generate income from classroom rental fees.

Haiti

In 2003, the Global AIDS Program (GAP), in collaboration with USAID, began supporting the rapid start-up of a nationwide network of 40 centers for voluntary counseling and testing (VCT) and treatment to prevent mother-to-child HIV transmission. CDC also established 10 specialized centers for comprehensive care and treatment of HIV-infected persons. SMDP was invited to undertake an initial assessment and planning visit in December 2003, and targeted several possible participants for the MIPH course in 2004, especially from NGO partners. In Haiti, NGOs play a major role in providing health services.

Haiti	2005	Cumulative
MIPH graduates	2	4
Workshops	1	1
In-country trainees	0	0
Applied management learning projects	0	0

A physician from the Ministry of Public Health and a nurse educator from GHESKIO (Groupe Haitien d'Etudes du Sarcome de Karposi et des Infections Opportunistes) graduated from the 2004 MIPH course. In 2005, MIPH graduates included an advocate with the Association for National Solidarity (ASON)—an information and advocacy group for those infected with and affected by HIV/AIDS, and the Director of Information and Communication from Zanmi Lasante—an organization that works with NGO Partners in Health to operate full service medical centers in Haiti in partnership with the Ministry of Health. The MIPH graduate from Zanmi Lasante developed and conducted two workshops to help data clerks and data managers at Zanmi Lasante to use electronic medical records to collect, analyze, and generate reports on HIV and TB patients. These electronic reports are required by the Global Fund Against AIDS, TB, and Malaria (GFATM) and the U.S. President's Emergency Plan for HIV/AIDS Relief (PEPFAR).

India

SMDP's partners in India are GAP India and the Indian Network for People Living with HIV/AIDS (INP+). GAP India sponsored two participants to attend the MIPH 2004 course, one each from GAP and INP+.

India	2005	Cumulative
MIPH graduates	0	8
Workshops	1	2
In-country trainees	36	36
Applied management learning projects	0	1

The two MIPH 2004 graduates organized the first Healthy Plan-*it*TM program management workshop for 14 INP+ project managers, in Chennai, the capital city of Tamil Nadu state, upon their return. These MIPH graduates were assisted during the 4-day workshop by the MIPH 2001 graduate from LAICO-ARAVIND Eye Care System and by SMDP staff.

Four of the 14 trained INP+ project managers assumed responsibility for conducting Healthy Plan-it™ training for several other groups, including 10 District Level Network (DLN) leaders and 12 community-based PLWHA peer educators in three districts. These PLWHA educators are key to the work of INP+, because they conduct support group meetings and represent the HIV-positive members and their families in times of need.

The leaders of two HIV/AIDS community organizations in one of the districts, Guntur, joined forces to create a sustainable plan and they then approached the district government for funding and support for an employment intervention for women infected with or affected by HIV/AIDS.

Future Plans

The MIPH 2004 graduate from GAP India plans to conduct a workshop on leadership and team building for INP+ managers in spring 2006. In addition, INP+ has requested Healthy Plan-it™ workshops for other DLNs, and Tambaram Hospital's CDC-sponsored Medical Graduate Fellowship program has requested management training.



INP+ workshop participants carry out a team-building exercise during the Healthy Plan-it™ program management workshop, in Chennai, Tamil Nadu.

Macedonia

SMDP's partners in Macedonia are the Foundation Open Society Institute Macedonia (FOSIM), the Faculty of Medicine, University of St. Cyril and Methodius, Skopje, and the Macedonia Ministry of Health. In 2003, these institutions partnered to implement a management capacity-building project for Macedonia similar to the Healthy Counties project in Croatia. The objective of the Health Management and Governance Project for Healthy Communities in Macedonia, or the Healthy Communities project, is to increase

the capacity of the local public health workforce to implement regional public health strategies that demonstrate the use of participatory and evidence-based health promotion interventions.

Macedonia	2005	Cumulative
MIPH graduates	1	3
Workshops	1	2
In-country trainees	20	47
Applied management learning projects	3	3

MIPH graduates, all faculty in the Department of Social Medicine, University of St. Cyril and Methodius, implemented the Healthy Communities project in July 2004 in three pilot communities: Gevgelija, Strumica, and Valandovo. The multidisciplinary teams in each pilot region comprised local personnel from the Institute of Public Health, the Ministry of Labor and Social Protections, Health Insurance Fund, Center for Social Care, and NGOs. Participants attended a four-module training based on Healthy Plan-*it*TM and other tools from the MIPH course. The first three modules were taught in 2004; the last module in January 2005. The three pilot teams returned to their communities and completed applied management learning projects using the tools learned in the workshop modules. MIPH graduates and SMDP staff conducted supervisory visits to assist the respective teams on their projects.



Photo above: Ms. Vera Dimitrievska, Public Health Manager, Open Society Institute in Macedonia; Dr. Valentina Simonovska (MIPH '04), Dr. Mome Spasovski ('03), Dr. Fimka Tozija ('03), Medical Faculty, Social Medicine, University of St. Cyril and Methodius; Laurel Zaks, formerly of SMDP; and Dr. Elena Kosevska ('04), also of the Medical Faculty, University of St. Cyril and Methodius. Photo below: Dr. Marija Kisman ('05) explains a point during a workshop exercise in the 2005 MIPH course.

The three teams from the first training cohort completed the training in the Healthy Communities project in July 2005. They presented their health strategies at a graduation in the presence of representatives from the Medical Faculty and the Chair for Social Medicine, University of St. Cyril and Methodius; the Ministry of Health; the Local Self-Government; city councils; and FOSIM. The team from Valandovo won best project award for "Caries prevention among children age 12 in Valandovo." The other two community teams reported on projects that addressed cardiovascular disease and drug prevention and control. A fifth faculty member of the

Department of Social Medicine, University of St. Cyril and Methodius, attended the MIPH course in the fall of 2005. MIPH graduates plan to train a second cohort in the Healthy Communities project and to carry out a Total Quality Management (TQM) workshop for health promoters in 2006.

Malawi

Malawi	2005	Cumulative
MIPH graduates	2	10
Workshops	1	3
In-country trainees	34	103
Applied management learning projects	9	21

SMDP's partners in Malawi include GAP Malawi, the National TB Programme (NTP), the Malawi AIDS Counseling and Resource Organization (MACRO), and the Infection Control Program (ICP) of the Ministry of Health. To date, 10 trainers from Malawi have graduated from the MIPH course.

The first management training workshop in 2003 for 35 TB program managers focused on TQM and leadership. Stakeholders added effective presentation skills to the curriculum for the second group of 34 TB program managers in 2004. Teams in the first two years completed 12 applied management learning projects to improve work processes on a variety of TB and HIV/AIDS-related topics.

In January 2005, Malawi MIPH course graduates and SMDP staff co-facilitated a one-week workshop on TQM and leadership for the third management training cycle. The third cohort consisted of 34 participants comprising seven teams—four TB program managers each from seven district hospitals plus three teams of two senior counselors each from three MACRO sites. Their applied management learning projects reported positive impact on improving such problems as low case-detection for smear-positive TB patients, insufficient quality control for HIV counseling and testing, and overly lengthy HIV counseling sessions.

Photo above: Knox Banda, Laboratory Technician, Nkhata Bay District Hospital, and Edith Chimutu, MACRO Blantyre, write countermeasures for a TQM exercise. Photo below: Tamara Phiri, MACRO Lilongwe, reviews the countermeasures matrix for her group.



Mexico

SMDP's partner in Mexico is the General Directorate of Epidemiology (DGE), Ministry of Health. Early in 2005, the Director General and staff from the Management in Public Health Development Center (CDG) of the DGE discussed and analyzed middle management personnel performance. Most of the DGE middle managers had knowledge of neither TQM nor other tools for decision making. They were experiencing difficulties in

communication and teamwork, and needed to develop leadership and management skills in order to guide their own staffs and to work more persuasively at the state and local levels of the public health system to improve the country's epidemiological surveillance.

Mexico	2005	Cumulative
MIPH graduates	2	10
Workshops	1	3
In-country trainees	23	79
Applied management learning projects	2	10

To address this problem, MIPH graduates in the DGE developed and taught a 3-week long Leadership and Management in Epidemiology Course in March 2005 for the 23 middle management DGE staff. Following the course, participants formed two teams to carry out projects. The Director General endorsed the course by his presence—he taught some of the sessions, was present throughout the course, and consulted on applied management learning project development.



Three workshops were held during the course—on evidence-based decision making, research results put into practice, and team building. Attitudes and abilities for teamwork, conflict resolution, and leadership skills were applied in group activities. Belbin's team roles test was used to determine each participant's profile to create more balanced and efficient teams within the DGE. Two quality improvement teams were created based on the results and each team developed a project. The two project themes are 1) "Improving the General Directorate of Epidemiology working environment" and 2) "Improving the process for the annual analysis of the epidemiological surveillance information." Both projects are ongoing.



Photo above: Dr. Erika de la Cabada Tamaz, DGE, works on a Healthy Plan-it™ exercise in the MIPH 2005 course with Mr. Patrice Nevil, Zanmi Lasante, Haiti, and Dr. Zorica Terzic, University of St. Cyril and Methodius, Macedonia. Photo below: Dr. Yolanda Martinez Marroquin, DGE, works on an intervention decision matrix during the Healthy Plan-it™ workshop in the MIPH 2005 course.

Pakistan

SMDP began working with the Pakistan Ministry of Health in 1992 and with the Aga Khan University in 1999. To date, Pakistan has five MIPH graduates, two of them faculty members at the Aga Khan University (AKU) in Karachi.

Pakistan	2005	Cumulative
MIPH graduates	0	5
Workshops	1	1
In-country trainees	14	201
Applied management learning projects	-	-

Since 1995, the Health Systems Management and Research (HSMR) course has been a regular offering in the continuing education program of the AKU Department of Community Health Sciences (CHS). This course, offered once a year, covers learning styles, leadership styles, quality of care, health systems reforms, conflict management, and marketing. The two MIPH alumni at AKU play leading roles in coordinating and directing the HSMR course, and supervised a major course realignment in 2002 to incorporate MIPH content.

The MIPH graduates at AKU apply their learning from the MIPH course at various levels of instruction. AKU undergraduate and master of public health courses on management are especially influenced by the MIPH curriculum. Teams carry out applied management learning projects, but AKU has no mechanism in place to monitor these projects.

Of the 1,371 health personnel who have participated in continuing education program courses to date, 238 (17.5%) were from Afghanistan, including 39 in the who attended the HSMR course in 2004; 14 students completed the HSMR course in 2005. Afghan participants come from the Ministry of Health as well as NGOs such as the Swedish Committee for Afghanistan, Ibn Sina Public Health Program, Mercy Corps International, UNICEF, Aide Medical International, WHO, and World Vision International.

The CHS department at AKU recently initiated the Afghan Capacity-Building Program under the Aga Khan Development Network, a consortium of development agencies working in health, education, and economic

HSMR graduates from Afghanistan and Pakistan pictured in 2005 in the courtyard of the AKU Department of Community Health Sciences.



development. In this program, AKU currently supports four health managers from the Afghan Ministry of Health in its master of science programs in health policy and management, and three more are enrolled this year for the masters level training. The School of Nursing at AKU also participates in the Afghan Capacity-Building Program by providing training and education opportunities for Afghan nursing students. AKU will continue to support education and training for more Afghan health managers and nurses in future years with the goal of strengthening the technical and management capacity of Afghanistan's health systems. AKU is committed to pursuing collaborative initiatives that have the potential for producing and sustaining a positive impact on the Afghan health system.

The Philippines

SMDP began working with the Philippines Department of Health (DOH) in 1994 to strengthen the management capacity of local public health workers. Currently, the 20 MIPH alumni in the Philippines work at the national- and regional-level health offices and with NGOs. The Philippines DOH established the Field Management Training Program (FMTP) in 1999. The program, in combination with its regional subsidiaries, has trained 183

managers who had completed 135 applied management learning projects as of the end of 2005. The FMTP received SMDP's most prestigious award for Management Training Excellence at the 2004 Biennial Conference on Strengthening Global Public Health Management Training Capacity, in Hanoi, Vietnam.

Philippines	2005	Cumulative
MIPH graduates	0	20
Workshops	1	3
In-country trainees	84	183
Applied management learning projects	42	135

Significant Achievements in 2005

The Philippines program has become a role model for financial sustainability and decentralization. Since its inception, the FMTP has been funded entirely by the DOH; USAID funds were used to pay only for non-recurrent costs such as trainer development in the MIPH course and technical assistance from SMDP. As the program matured, FMTP graduates from the regional health offices launched their own regional management training programs using DOH funds, and have found ways to share the training and supervision costs with local government units. The trainees' applied management learning projects have had a significant impact on a variety of public health programs by improving organizational performance in such areas as 1) record keeping, 2) the availability of pharmaceuticals, 3) food vendor compliance with sanitary certificates, and 4) newborn registration systems.

By 2005, regional programs in Central Luzon, Bicol, Mindanao and Visayas had graduated at least one cohort each, and two more regional programs will become operational in 2006. The role of the FMTP evolved in 2005 from direct provider of training to supporting the development and assuring the quality of the training programs in the region and in other countries, including Commonwealth of the Northern Mariana Islands, Thailand, and Vietnam. Technical assistance focuses on program planning, training, and supervising applied management learning projects.

In May 2005, the FMTP organized the first National Conference for MIPH and FMTP alumni. The conference, attended by 70 graduates, served as a useful opportunity to share best practices for management training, to develop advocacy strategies for starting new regional programs, and to network with other professionals.



Participants at the first FMTP Alumni Annual Conference in Manila in May 2005.

Saipan CNMI

SMDP began its public health capacity-building efforts in the Commonwealth of the Northern Mariana Islands (CNMI) when two public health professionals from the Department of Public Health (DOH) in Saipan attended the MIPH course in 2000.

Saipan CNMI	2005	Cumulative
MIPH graduates	1	3
Workshops	1	2
In-country trainees	28	46
Applied management learning projects	3	7

In 2004, two additional DOH staff attended the MIPH course and returned home to teach a TQM and team-building workshop for 28 senior hospital managers in Saipan in early 2005 with assistance from MIPH alumni in Guam. (See the section of the Guam report entitled "Management Trainers in CNMI," p. 15.) At the end of the workshop, these managers formed nine quality improvement teams to address specific management

projects in organizations. Each team received ongoing supervisory support from workshop faculty during the ensuing months, and an SMDP staff member met with each team in August 2005 to review progress and provide additional guidance.

A graduation ceremony was held in November 2005, and the three completed projects were presented to the entire class. Attending the graduation ceremony were two MIPH alumnae from UOG's HLATTE Project, and the current and past CNMI Secretaries of Health, James Hofschneider and Joseph Villagomez, respectively. The three completed projects are summarized below:

Reduce Insurance Claim Denials

From October 2004 to March 2005, approximately 10% of all claims submitted for payment by the Commonwealth Health Center (CHC) were denied by insurers because of errors or missing information (national standards for rates of claim denial are < 4%). The dollar amount represented by these unpaid claims totaled \$1,070,348. Not only do denied claims affect the hospital's cash flow, they result in significant labor costs for CHC personnel who must revise and resubmit each claim. An analysis showed the business office to be responsible for 51% of the errors. Countermeasures were implemented to address several root causes of these problems. These countermeasures, implemented April–September 2005, included a system to monitor and track errors by hospital department, systems to facilitate insurance verification and pre-authorization, and an in-service orientation for medical personnel on proper procedures. The value of denied claims was reduced for the final quarter 2005 by approximately 30%.

Secretary of Health James Hofschneider requested that this presentation be repeated at the senior medical staff meeting the following week.

Missed Visits for Hemodialysis

The population of the Marianas Islands has a high prevalence of diabetes and end-stage renal disease, one of its many complications. Currently 100 patients in CNMI require renal dialysis three times per week, a number that translates into approximately 18 patients per shift. Each patient is given an appointment and the staff must prepare a clean and primed dialysis kit for each new patient. Missed appointments result in wasted staff time, wasted supplies, and inconvenience to other dialysis patients. The direct costs for a missed visit are approximately \$500 and approximately 1–2% of all visits are missed. From January–July 2005, there were 202 missed visits, representing a non-reimbursed cost to the hospital of \$97,690. Four patients accounted for 35% of these missed visits. Root causes of this problem included poor patient motivation and lack of transportation. Countermeasures implemented included hiring a social worker to educate chronic no-show patients, and instituting penalties for missed appointments (i.e., loss of priority day-shift dialysis scheduling). Transportation vouchers are also being considered for patients with a proven financial need. These countermeasures were implemented only during the last months of 2005. Although there had been some reduction in missed visits by the time this report was published, more time is needed to assess the long-term impact.

Increase Breastfeeding among Infants Born at CHC

CHC's Labor & Delivery Unit carried out 117 deliveries in August 2005. Contrary to hospital policy, only 6% of these mothers were breastfeeding by the time of discharge compared to a goal of 100% breastfeeding. Root causes included no monitoring or tracking of breastfeeding in the unit, inadequate staff training, and inadequate health education for mothers. Countermeasures were developed to address these problems, and the proportion of mothers breastfeeding rose from 6% in August to 32% in October.



Workshop participants with Dr. Michael Malison and visiting instructors from Guam.

Future Plans

- Continue providing supervisory support to the remaining teams to ensure they complete their projects and earn certificates.
- Publish a summary of the “Reducing Denied Claims” project in a local or regional medical journal and present it at the next Pacific Islands Health Officers’ Association meeting.
- Explore ways the CNMI Office of Personnel Management can help integrate future training into the personnel system requirements.

Serbia and Montenegro

Serbia and Montenegro	2005	Cumulative
MIPH graduates	2	4
Workshops	1	1
In-country trainees	32	32
Applied management learning projects	4	4

Since 2004, SMDP has partnered with the Centre School of Public Health at the University of Belgrade, School of Medicine, and the Open Society Institute (OSI) in Serbia to implement a three-year community health development project endorsed by the Serbia and Montenegro Ministry of Health. The objective of the project is to strengthen the capacity of local public health institutions to implement regional public health strategies that demonstrate the use of participatory and evidence-based health promotion interventions.



Associate Professor Sandra Grujicic (MIPH '05), Institute of Epidemiology, teaches Healthy Plan-it™ to four community groups from Serbia.

In the first phase of the Community Health Development project, multidisciplinary teams under the leadership of the regional Institutes of Public Health (IPH) were formed in four pilot regions: Pancevo, Sabac, Somber, and Leskovac. The project teams of eight members each comprise a mix of public health professionals, lawyers, teachers, NGO personnel, and local public sector workers. In April 2004, the project teams participated in an initial three-day workshop on “Public Health, Policy for Health, and Public Health Strategy.”

The regional project teams attended a four-day Healthy Plan-it™ workshop at the Centre School of Public Health in May 2005. The training team for the project included six faculty members from the School of Medicine, four of them MIPH graduates. All participants passed a written exam at the end of the workshop to receive professional continuing education credit from the Center School of Public Health.

The four regional IPH project teams returned to their counties to complete applied management learning projects using Healthy Plan-*it*TM tools. Centre School of Public Health staff conducted supervision visits to work with the teams on their projects with technical assistance from SMDP. Completion of the applied management learning project is a requirement for course certification. The teams used Healthy Plan-*it*TM tools to plan priority health interventions based on their broader regional public health strategies. The projects selected for 2005–2006 address the public health issues of cervical cancer mortality, respiratory disease in schoolchildren, environmental allergens, and youth drug abuse.

The regional teams attended additional training modules on public health information systems in July 2005 and on communications for public health in November 2005. A final graduation and presentation of the regional public health strategies and Healthy Plan-*it*TM projects is scheduled for November 2006.

Future Plans

In 2006, two additional faculty members from the University of Belgrade will attend MIPH. The MIPH graduates will begin a new TQM training initiative in 2006 for 20 hospital teams, with support from OSI and the European Agency for Reconstruction and Development.



From left, Dr. Jadranka Krasic, Institute of Public Health, Leskovac; Dr. Vanja Ilic, Institute of Public Health Leskovac; Mrs. Suzana Stankovic, Center for Social Work; standing, Mrs. Marina Ilic, School Board (teacher), Leskovac; Dr. Ivana Mitic, Institute of Public Health Leskovac; and Dr. Jasmina Jovanovic, Primary Health Care Leskovac.

Taiwan

Taiwan	2005	Cumulative
MIPH graduates	2	12
Workshops	2	2
In-country trainees	65	95
Applied management learning projects	58	86



Workshop participants in Taiwan create their communications plans to address a number of public health issues. From left, Bureau of Health Promotion section chiefs Mrs. Chen-Su Lin, Mrs. Lin-Yi Shin, Mrs. Ching-Yi Shih, Mrs. Yu-Chuen Hsieh, and Dr. Shin-Kuei Lai.

SMDP has been working with Taiwan's Bureau of Health Promotion (BHP) since 1997 to strengthen public health management training capacity. To date, Taiwan has 12 MIPH graduates including several from the BHP and the Taiwan Center for Disease Control. In 2003, SMDP began providing technical assistance to develop and teach priority setting and planning based on Healthy Plan-*it*TM from the MIPH course to a target

audience of tobacco control personnel from the city and county health departments, with some national-level staff from the Department of Health (DOH) also attending. The first round of Healthy Plan-*it*TM training for 30 participants took place in June 2004, with a graduation workshop and presentation of their 28 completed applied management learning projects in December. The second

round of Healthy Plan-*it*TM training was held in April 2005 for 34 staff members from 24 city and county health bureaus. All the training for the second cohort was delivered by MIPH graduates and the 33 applied management learning projects completed by participants were reviewed by SMDP and BHP staff during a technical assistance visit in May 2005.

BHP staff developed a new training initiative in public health communications in 2005. During the 2004 MIPH course in Atlanta, participants from the Taiwan DOH and the BHP, including the BHP Deputy Director, identified a need for strengthening the management communications skills of mid-level public health professionals in Taiwan at national and local levels. SMDP staff assisted the MIPH graduates to develop and design the workshop curriculum and content. In June 2005, SMDP staff and MIPH graduates co-facilitated a 4-day workshop for 31 mid-level public health managers that covered strategic communications for public health organizations, communications and the media, and conflict resolution.

In December 2005, 21 of the 31 original workshop attendees participated in a second communications workshop on public health marketing and advocacy and presented 25 strategic communications plans for a priority

program as a graduation requirement. Participants came from a wide variety of program areas within the Taiwan DOH, including health education, health promotion, cancer prevention, communicable disease control, food safety, pharmaceuticals, and planning. The following themes illustrate a sample of the diverse strategic communication plans presented during the graduation:

- Increase the breast and cervical cancer screening rates in women >30 years
- Increase the number of school campuses implementing the no-smoking policy
- Improve travelers' awareness of communicable diseases when traveling abroad
- Increase regular physical exercise among those >30 years of age
- Build a community pharmacist medical care service network
- Increase the percentage of children receiving routine dental fluoride applications
- Improve the implementation of dengue fever work plans

The BHP will integrate both Healthy Plan-*it*TM and the strategic communication workshops into the annual BHP training plan. BHP staff have assumed full responsibility for facilitating future workshops.

Thailand

Thailand	2005	Cumulative
MIPH graduates	4	11
Workshops	1	1
In-country trainees	24	24
Applied management learning projects	5	5

In 2004, officials from the Thai National Institute of Health (NIH) and the Ministry of Public Health (MOPH) expressed interest in establishing a management training program modeled on the Philippines Laboratory Management Training Program. Since then, a 2003 MIPH graduate from Mahidol University (MU) has worked with SMDP to establish a Thai Sustainable Management Training Center (SMTC). Institutional partners now include the MOPH, MU, the NIH and the Thai-MOPH CDC Collaborative (TUC). A four-person team representing all four institutions attended the 2005 MIPH course and is now assisting with the program.

The five MIPH graduates co-taught an initial SMTC Total Quality Management (TQM) course in May 2005 to 24 medical technologists representing eight hospital labs, one regional medical center, and the NIH. Results of three of their five applied management learning projects are summarized below:

- The percent of acid-fast bacillus smears for TB testing that exceeded the 40-minute standard in Mae Lao and Mae Suai Hospital was reduced from 20% to 16% (12/75), an 80% reduction.

- In Phayao Hospital, the percent of patients waiting longer than normal was reduced from 82% to 49%, thus enabling hospital staff to provide service to at least 20 more patients per day on average.
- At Rachaburi Hospital, the average blood specimen processing time was cut by 45%, from 83 to 46 minutes.

The remaining projects will be completed in June 2006.

Future Plans

Hold a second TQM workshop in 2006 for public health practitioners from the rural provinces of Lopburi, Nakhonsawan, and Pittsanulok and from the central province of Nonthaburi, assisted by SMDP staff.



Medical and public health personnel of Lopburi and Phitsanuloke provinces work on a countermeasure activity during the second Thailand SMTC workshop.

Uganda

Uganda	2005	Cumulative
MIPH graduates	2	14
Workshops	0	2
In-country trainees	10	51
Applied management learning projects	10	26

SMDP partners in Uganda include GAP Uganda and the Institute of Public Health (IPH), Makerere University. In 2002, three Ugandans attended the MIPH course. These public health professionals came from the National TB Programme, the Uganda Viral Research Institute (UVRI), and the STD/AIDS Programme in the Ministry of Health. In 2003, the

Institute of Public Health (IPH) became the institutional home of the public health management training program. Two persons from the IPH/CDC HIV Fellowship Program, including the fellowship coordinator, attended the MIPH course in 2003.

In 2005, MIPH graduates from the Makerere University IPH taught Healthy Plan-*it*[™] to the annual cohort of ten IPH/CDC HIV Fellows. The fellows completed applied management learning projects by developing project plans for priority programs in their host institutions. In July 2005, a Ugandan MIPH graduate from IPH was invited to facilitate the first public health management module to 2005 participants in the CDC-sponsored Field Epidemiology and Laboratory Training Program in Nairobi, Kenya.

CDC Uganda sponsored two participants to the 2005 MIPH course, a laboratory manager and a trainer with the HIV Reference Laboratory, Uganda Virus Research Institute. They hope to implement management modules within laboratory training scheduled during 2006.



Kenyan masters degree candidates in laboratory management and epidemiology learn public health management and leadership skills from MIPH 2004 graduate Dr. Elizeus Rutebemberwa of Uganda, Makerere University Institute of Public Health (seated). Also pictured is Anisa Kassim of SMDP.

Vietnam – HIV/AIDS

Vietnam HIV/AIDS	2005	Cumulative
MIPH graduates	2	7
Workshops	3	3
In-country trainees	70	70
Applied management learning projects	22	22

In 2004, the CDC Global AIDS Program (GAP) partnered with the Hanoi School of Public Health (HSPH) to enhance public health capacity for HIV prevention and care. A new 5-year agreement between GAP and the HSPH has three objectives: 1) a decentralized self-sustaining HIV/AIDS management training program, 2) a data-management system for U.S. government HIV/AIDS programs in Vietnam, and 3) an overarching

HIV/AIDS strategy for the HSPH. To address the first objective—creating a decentralized self-sustaining HIV/AIDS management training program—three training centers were established: one in the HSPH in Hanoi for the north, a second in the Preventive Medical Center in Danang for the central region, and a third in the Institute for Hygiene and Public Health in Ho Chi Minh City (HCMC) for the south of Vietnam. All three training centers—in Hanoi, Danang, and HCMC—will provide management training workshops for HIV program managers in their regions.

In July 2005, three HSPH faculty who graduated from MIPH in 1997 and SMDP staff facilitated a two-week Training-of-Trainers (ToT) workshop in Hanoi focusing on Total Quality Management (TQM) and effective training

techniques for HCMC and Danang public health personnel. The primary goal of the training is to enhance public health management capacity for HIV/AIDS prevention and care activities in Vietnam. Twenty-three participants from five institutions attended the ToT course and then carried out six applied management learning projects that dealt with work processes such as receiving samples in



Three regional TQM workshops were held in Vietnam. Above left, a team in Danang works on an exercise; the photo below shows a team in the Hanoi TQM workshop. Above, TQM instructor Dr. Sunny Nhat (MIPH '05) answers participants' questions during the workshop in Ho Chi Minh City.

laboratories and processing rapid HIV tests. The leaders of the program from Danang Preventive Medical Center and HCMC Institute for Hygiene and Public Health also attended the 2005 MIPH course.

Since July 2005, the 23 participants who completed the July ToT facilitated TQM workshops in all three training centers. These TQM workshops reached 70 provincial HIV program managers from 24 provinces across the country. Graduation workshops at all three training centers for the participants of the regional TQM workshops are planned in the first half of 2006. A national HIV management training conference planned for July 2006 will give all participants of the TQM workshops the chance to present their best applied management learning projects. The second cycle of regional TQM workshops will begin at all three training centers in the fall of 2006.

Vietnam TB

Vietnam TB	2005	Cumulative
MIPH graduates	0	10
Workshops	1	4
In-country trainees	13	81
Applied management learning projects	13	67

SMDP's collaboration with the National Tuberculosis Control Program (NTP) in Vietnam and CDC's Division of Tuberculosis Elimination in the National Center for HIV, STI and TB Prevention to build a management training program for tuberculosis program managers began in 2001.

In 2005 the fourth cycle of NTP management training was completed. Thirteen provincial TB program managers were trained in leadership, epidemiology, research, presentation skills, health sector reform, behavioral style analysis, planning, and TQM. They implemented 13 applied management learning projects addressing such issues as quality of sputum smear samples, patient follow-up, and low smear-positive detection rate. SMDP provided technical assistance to the NTP in supervising these projects.

Altogether the NTP management training program has trained 81 provincial TB program managers who have completed 67 applied management learning projects throughout Vietnam. NTP has integrated continued management training into its 2006–2010 national development plan which will be presented to international stakeholders in July 2006.

Zambia

Zambia	2005	Cumulative
MIPH graduates	1	6
Workshops	0	1
In-country trainees	0	27
Applied management learning projects	0	18

SMDP's partners in Zambia include CDC's Global AIDS Program (GAP) in Zambia and Zambia's Central Board of Health and Ministry of Health. Laboratory managers and medical technologists representing all nine provinces participated in the first management training in 2003. The participants' applied management learning projects addressed such issues as late presentation of malaria test results and improperly fixed biopsy tissues. In 2004, an overview of the Zambian laboratory management training initiative was presented at SMDP's second biennial conference in Hanoi, Vietnam.

Two GAP-funded participants attended the 2004 MIPH course: a senior lecturer at Ndola College of Biomedical Science and the Director of Clinical Services at Ndola Central Hospital. In 2005, the seventh GAP-sponsored participant from Zambia attended MIPH: the Director of Clinical Care and Diagnostic Services in the Central Board of Health, Lusaka.

Planning began in 2005 for a management training course with focus on Total Quality Management (TQM) for district HIV Voluntary Counseling and Testing laboratory personnel. The workshop will be conducted in August 2006. Participants will be involved in activities related to the President's Emergency Plan for AIDS Relief. Several MIPH graduates will co-facilitate this workshop and supervise the applied management learning projects the workshop participants will implement at their workplaces.



Dr. Velepi Mtonga, Central Board of Health, facilitates a TQM exercise during the MIPH 2005 class.

Appendices

A: Program Development Indicators

B: SMDP Guiding Principles

C: MIPH Donors 1992–2005

D: MIPH Graduates 1992–2005

Appendix A

Program Development Indicators

SMDP monitors the program development in each country using the indicators below to assess progress from early to advanced stages. In the early development stages, SMDP provides intensive training and project supervision support to new programs. As programs mature, MIPH alumni assume more responsibility for in-country training and supervision. At the most advanced level, programs serve as regional resources supporting the development of public health management training programs in other countries.

Program Development Indicators

Early Development	Intermediate Development	Advanced Program Development
<ul style="list-style-type: none"> <input type="checkbox"/> Completed <1 cycle of training and applied management learning projects <input type="checkbox"/> 1-3 MIPH graduates <input type="checkbox"/> MIPH alumni conduct <50% of training <input type="checkbox"/> SMDP planning and assessment visit completed 	<ul style="list-style-type: none"> <input type="checkbox"/> Completed >1 cycle of training and applied management learning projects <input type="checkbox"/> 4-7 MIPH graduates <input type="checkbox"/> MIPH alumni conduct >50% of training <input type="checkbox"/> Training work plan implemented <input type="checkbox"/> Established funding mechanisms <input type="checkbox"/> Institutional home with at least part-time staff <input type="checkbox"/> >50% of applied management learning projects have measurable impact 	<ul style="list-style-type: none"> <input type="checkbox"/> Completed >3 cycles of training and applied management learning projects <input type="checkbox"/> >8 MIPH graduates <input type="checkbox"/> MIPH alumni conduct 100% of training and supervisory follow-up <input type="checkbox"/> Training work plan in 2nd or 3rd phase of implementation <input type="checkbox"/> Established funding mechanisms and income-generating activities <input type="checkbox"/> Institutional home with permanent staff and budget resources <input type="checkbox"/> >80% of applied management learning projects have measurable impact <input type="checkbox"/> Program serves as a regional resource for public health management training
<p>Examples:</p> <ul style="list-style-type: none"> o Brazil o Haiti o Lesotho o Mozambique o Saipan o Serbia & Montenegro o Swaziland o Thailand 	<p>Examples:</p> <ul style="list-style-type: none"> o Macedonia o Malawi o Mexico o Taiwan o Uganda o Vietnam/GAP o Zambia 	<p>Examples:</p> <ul style="list-style-type: none"> o Botswana o Croatia o Guam o Philippines o Vietnam/TB

Appendix B

SMDP Guiding Principles

- Emphasize applied skills, not just theoretical knowledge.
- Train in a highly interactive manner and draw upon participants' personal experience to reinforce team learning.
- Incorporate public health examples to illustrate the use of management tools that may originally have been developed for industry or other sectors (e.g., TQM); keep examples relevant for developing country audiences.
- Provide numerous tips, practical aids, and tools that facilitate teaching the materials to others.
- Emphasize evidence-based decision-making in management.
- Use applied management learning projects to reinforce classroom learning, multiply training benefits, and generate products that have a measurable impact on public health program goals.
- Provide post-course technical assistance to support alumni teaching efforts.
- Solicit feedback through a variety of means (e.g., questionnaires, focus groups, external evaluations) and continuously strive to improve the content as well as the learning process.
- Provide post-training incentives such as website access, regional networking among alumni, conferences, fellowships, and career development opportunities to stimulate lifelong learning.

Appendix C

MIPH Donors 1992–2005

Academy for Educational Development
Aga Khan University
American Bureau for Medical Advancement in China
Asian Development Bank
Basic Support for Institutionalizing Child Survival
Bill and Melinda Gates Foundation
CARE
CARE Ghana
CARE USA/Bolivia
Caribbean Epidemiology Research Centre
CDC Coordinating Office for Global Health*
CDC Division of International Health, Epidemiology Program Office, CDC
CDC Global AIDS Program, National Center for HIV, STD, and TB Prevention
(NCHSTP)
Division of Tuberculosis Elimination, NCHSTP
CDC International Health Program Office*
CDC National Center for HIV, STD, and TB Prevention
CDC Office of Global Health*
CDC Program Against Micronutrient Malnutrition
CDC Public Health Practice Program Office
Commonwealth of the Northern Mariana Islands, Department of Health
Commonwealth Health Center, Northern Mariana Islands
Concern International
DeKalb County Board of Health
Emory University School of Public Health
Federated States of Micronesia
Field Epidemiology Training Program, Thailand
Fogarty Foundation
General Directorate of Epidemiology, Mexico
Government of Bahrain, Ministry of Health
Government of Israel, Ministry of Foreign Affairs
Government of the Philippines, Department of Health
Government of the Republic of Palau, Ministry of Health
Guam Memorial Hospital
Hebrew University
John Snow International

**names by which the CDC Coordinating Office for Global Health has been known*

Meharry Medical College, Nashville, Tennessee
Ministry of Public Health, Thailand
National AIDS Control Program, Honduras
National Foundation for CDC
Open Society Institute of the Soros Foundation
Pan American Health Organization
Project Concern, Bangladesh and Rwanda
Project HOPE
Reproductive and Child Health Alliance, Cambodia
Rockefeller Foundation
Save the Children, UK
Seva Foundation
Taiwan Department of Health
Shell Oil Foundation
U.S. Dept of Health and Human Services, Office of International
and Refugee Health
U.S. Agency for International Development/CDC Data for
Decision-Making
U.S. Agency for International Development/Mexico
U.S. Agency for International Development/Philippines
UNICEF
United Arab Emirates
United Nations Development Programme
United Nations Population Fund, Vietnam
United Nations Works and Relief Agency
University of Guam
Woodruff Foundation
Woodruff Foundation/CARE-CDC Health Initiative
World Bank
World Health Organization
World Health Organization, Thailand

Appendix D

MIPH Graduates 1992–2005

Armenia

Dr. Vladimir Davidyants ('94)

Bahrain

Dr. Salah A. Adurahman ('97)

Bangladesh

Mr. Md. Asadul Haque ('03)

Mr. Kazi Hossain ('93)

Mr. Rafiqul Islam ('93)

Dr. Abdul Fajal Sarker ('04)

Bolivia

Ms. Daly Santa Maria Aguirre ('02)

Dr. Roberto Baker ('92) (deceased)

Mr. Fedor A. Espinosa-Noriega ('95)

Mr. Antonio Gómez ('92)

Botswana

Mrs. Rose Lebang Choto ('05)

Ms. Audrey Kgosidintsi ('00)

Mr. Modisaotsile Mokomane ('03)

Mr. Ronald Molosiwa ('01)

Ms. Kgomotso More ('00)

Mr. Martin Seike Mosima ('01)

Mr. Tebatso Paul ('04)

Mrs. Othilia Tjawada Phumaphi ('02)

Brazil

Mrs. Elizabeth David dos Santos ('05)

Cambodia

Mr. Chanthol Eang ('98)

Dr. Thay Ly Heng ('02)

Dr. Saorith Khun ('02)

Dr. Has Phal Mony ('03)

Dr. Bak Khim Team ('02)

Dr. Sam-An Ung ('98)

China

Dr. Chen Zhihui ('96)

Dr. Guo Biao ('94)

Dr. Guo Mei ('94)

Dr. He Xiong ('93)

Dr. Liu Ying-ying ('96)

Dr. Liu Yong-Xiao ('96)

Dr. Luo Jiacong ('94)

Dr. Shao Ruitai ('95)

Mr. Sun Shuqi ('96)

Dr. Wang Jian ('96)

Ms. Wang Jie ('92)

Dr. Wang Ruotao ('93)

Dr. Wang Shaohua ('96)

Dr. Wang Xiaomao ('94)

Ms. Yan Zhengmin ('94)

Ms. Zhang Lingping ('97)

Ms. Zhu Peifu ('92)

Colombia

Dr. Fernando de la Hoz ('93)

Dr. Jorge Jara ('94)

Cote d'Ivoire

Dr. Georgette Adjorlolo-Johnson ('99)

Dr. Marcillin Aye ('02)

Dr. Nablé Y. Coulibaly ('97)

Dr. René-Anatole Ekpini ('01)

Croatia

Dr. Ognjen Brborovic ('03)

Dr. Aleksandar Dzakula ('02)

Mrs. Sonja Grozic-Zivolic ('02)

Dr. Tea Vukusic Rukavina ('01)

Dr. Ivan Sklebar ('03)

Dr. Selma Sogoric ('01)

Dominican Republic

Dr. Karen Cuevas Mendoza ('98)

Ecuador

Dr. Eduardo Mauricio Espinél ('95)

Egypt

Dr. Madiha Fathy Ahmed ('98)

Dr. Nader Faiq Fatouh ('99)

Dr. Ramez Mahaini ('98)

Dr. Fikry Abdel Wahab ('97)

Ethiopia

Dr. Tekeste Kebede ('04)

Dr. Hailu Negassa ('05)

Mr. Zewde Tamrat ('01)

Federated States of Micronesia

Dr. Herliep Nowell ('99)
Dr. Kino Ruben ('99)

Georgia

Dr. Magda Esebua ('94)
Dr. George Kiknadze ('94)
Dr. Nikoloz Natsvlshvili ('98)
Dr. Nana Pruidze ('94)
Dr. Ekaterina Sioridze ('98)

Ghana

Ms. Florence Addo ('92)
Ms. Joyce Sepenoo ('01)
Ms. Charity Tuffour-Kwarteng ('00)
Mrs. Lily Yarney ('03)

Guam

Ms. Laurent Duenas ('00)
Mr. Phillip Harrison ('04)
Mrs. Maria Isabel Diaz Pangelinan ('02)

Guatemala

Dr. Guillermo Zea Flores ('95)

Haiti

Mr. Gregory Desir ('05)
Dr. Yves Gaston DesLouches ('04)
Mr. Patrice Nevil ('05)
Ms. Claudia Thomas Riche ('04)

Honduras

Dr. Leda Bolaños ('93)
Dr. Cesar Nuñez ('93)

India

Dr. Raja Bharti ('93)
Mr. Stanley Joseph ('04)
Dr. Sudhir Joshi ('93)
Mr. Keerti Bhusan Pradhan ('01)
Mr. Ramachandran Prakash ('93)
Dr. Mala Ramachandran ('98)
Dr. Govada Mastan Rao ('98)
Mr. Jacob Varghese ('04)

Indonesia

Dr. Swandari Djojo ('01)
Dr. Ramotan Gultom ('03)

Dr. Yuwono Sidharta ('94)
Dr. Tunggul Parningotan Sihombing ('03)
Dr. Lukman Hakim Tarigan ('01)
Ms. Nelwina Tomi ('01)
Dr. Hariadi Wibisono ('01)

Israel

Dr. Malka Avitzour ('00)
Mrs. Paula Feder-Bubis ('97)
Dr. Ehud Miron ('97)
Dr. Ronny A. Shtarkshall ('98)

Jordan

Dr. Samir I.M. Haj-Bloukh ('98)
Dr. Amin Abdel Jaber ('97)

Lebanon

Dr. Kamel Kaddoura ('97)

Lesotho

Mrs. Mapiers Mohapi ('05)

Macedonia

Dr. Marija Kisman ('05)
Dr. Elena Kosevska ('04)
Dr. Valentina Simonovska ('04)
Dr. Mome Spasovski ('03)
Dr. Fimka Tozija ('03)

Malawi

Mrs. Patricia Rhoda Banda ('02)
Ms. Theresa Banda ('93)
Mrs. Felesia Samuel Chawani ('05)
Mr. Wright James Chisamba ('03)
Mr. Isaias Leo Dambe ('05)
Mr. Andrew D.R.C. Dimba ('03)
Mrs. Fannie Kachale ('05)
Mr. Bruno Arnold Nanthuru ('04)
Mr. Jonathan Nkhoma ('93)
Mr. Barton Giston Upindi ('04)

Malaysia

Ms. Zainab Tambi ('93)

Mali

Dr. Halima Dao ('99)
Dr. Mamadou Dravé ('98)

Mariana Islands (Saipan CNMI)

Mrs. Pasquana H. Calvo ('04)
Ms. Marina P. DeLeon Guerrero ('05)
Mr. David B. Rosario ('00)
Mrs. Martha Faustina C. Santos ('04)
Ms. Jocelyn M. Songsong ('00)

Mexico

Ms. Silvia Artasánchez-Franco ('93)
Dr. Martin Castellanos ('03)
Dr. Erika De la Cabada Tamez ('05)
Dr. Maria J. Hoy (Susy) ('98)
Dr. Pablo Kuri ('94)
Dr. Miguel Lombera ('93)
Dr. Armando Martinez Guarneros ('03)
Dr. Yolanda Martinez Marroquin ('05)
Dr. Fernando Meneses-Gonzalez ('92)
Dr. Javier Montiel-Perdomo ('99)

Mozambique

Mrs. Argentina Ezequiel Munguambe ('05)
Mrs. Olivia Alberto Semende ('05)

Nicaragua

Dr. Jose M. Crus ('97)
Mr. Eduardo Paucar Garces ('00)
Dr. Mario Jimenez-Garcia ('00)
Dr. Elena M. McEwan ('97)
Dr. Oscar Nuñez ('97)
Ms. Fatima R. Réal ('97)
Ms. Sylvia Elena Reyes ('01)
Dr. Harold Rugama ('01)
Dr. Armando Ulloa ('01)

Niger

Mr. Sadi Moussa ('95)

Nigeria

Dr. Abel Eigege ('96)
Dr. Emmanuel I.I. Gemade ('95)
Dr. Jonathan Yisa Jiya ('95)
Dr. Kenneth Nyinongo Korve ('99)
Dr. Emmanuel S. Miri ('95)
Mrs. Ifeoma C. Onwukeme ('96)

Pakistan

Mr. Bilal Ahmad ('93)
Dr. Mohammad Ammacha ('92)
Dr. Syed Muhammad Israr ('01)

Dr. Aryn Lakhani ('99)
Dr. Mohammad Rafiq ('92)

Palau

Mr. Gillian Johanes ('96)

Palestine

Dr. Khuloud J. Khayyat Dajani ('00)
Dr. Qasem A. Maa'ni ('97)
Dr. Munzer Sharif ('94)
Dr. Ibrahim Sulqan ('97)

Philippines

Dr. Agnes Benegas ('04)
Dr. Agnes V. Barrientos ('02)
Ms. Ma. Thelma C. Bermudez ('00)
Dr. Mario B. Brizuela ('95)
Dr. Janice Z. Bugtong ('96)
Dr. Teresa "Tet" Castillo ('01)
Dr. Ma. Ruth S. Gamaro ('97)
Dr. Aguedo Troy Gepte IV ('04)
Dr. Juan Lopez ('03)
Dr. Socorro "Coco" Patag Lupisan ('01)
Dr. Noel Macalalad ('03)
Dr. Rio Magpantay ('02)
Mr. Onofre Edwin Aguilar Merilles ('02)
Dr. Marlow Niñal ('95)
Dr. Maria Concepcion Rocas ('98)
Ms. Lydia Sombrero ('00)
Dr. Nemia Sucaldito ('94)
Dr. Enrique Tayag ('94)
Dr. Ernie Vera ('01)
Dr. Grace Abad Viola ('96)

Romania

Dr. Tatiana Ciomartan ('92)

Rwanda

Mr. Christophe Habiyambere ('04)

Serbia & Montenegro

Dr. Vesna Bjegovic-Mikanovic ('04)
Dr. Slavenka Jankovic ('04)
Dr. Sandra Sipetic-Grujicic ('05)
Dr. Zorica Terzic ('05)

Sierra Leone

Mr. James Mohamed Kanu ('95)

South Africa

Ms. Nomonde Bam ('94)
Ms. Moonira Banu Mahomed Khan ('95)
Ms. Lindi Mhlanga ('01)
Ms. Regina Mokgokong ('94)
Ms. Hermina Nxumalo ('95)
Mrs. Batseba Moshupi Phiri ('95) (deceased)
Dr. Geoffrey Setswe ('00)
Ms. Kesekwaemang Thole-Thuntsi ('95)

St. Lucia

Ms. Debra Nanan ('94)

Swaziland

Ms. Juliet Aphane ('93)
Ms. Zanele Claudia Mhlongo ('05)

Taiwan

Ms. Ying-Chao Chang ('03)
Dr. Kun-Yu Chao ('04)
Ms. Tzu-Ling Chen ('04)
Dr. Chan-Hsien Chiu ('05)
Dr. Jih-Haw Chou ('95)
Mrs. I-Cha Huang ('04)
Mr. Wei-Gang Huang ('99)
Dr. Dah-Shyong Donald Jiang ('05)
Mrs. Jaw Shioh Juuan (Fran) ('04)
Mr. Vincent Kang ('97)
Dr. Shu-Hui (Sylvia) Tseng ('03)
Dr. Shioh-Ing Wu ('92)

Tanzania

Mr. Samson Nyagwegwe ('92)
Dr. Alfred Sanga ('92)
Dr. Geoffrey Rogathe Somi ('04)

Thailand

Mrs. Wilai Chalermchan ('05)
Dr. Poovanon Eamchan ('01)
Ms. Sirima Pattamadilok ('04)
Mrs. Vallerut Pobkeeree ('05)
Dr. Narumol Sawanpanyalert (Silarug) ('93)
Dr. Sangsom Sinawat ('92)
Dr. Potjaman Siriarayapon ('03)
Ms. Utoomporn Sittisingh ('99)
Dr. Chanuantong Tanasugarn ('00)
Asst. Prof. Paranee Vatanasomboon ('05)
Mrs. Aree Wadwontham ('05)

Trinidad and Tobago

Ms. Jocelyn P.H. Chandler ('96)
Dr. Merle Lewis ('95)
Mr. Gladstone Skeete ('98)
Ms. Valerie Wilson ('93)

Turkmenistan

Dr. Elena Uryevna Samarkina ('02)

Uganda

Ms. Mary Grace Alwano ('95)
Mr. Peter Awongo ('02)
Mrs. Kamaranzi O.O. Bakunda ('05)
Mr. Rudolf Buga ('04)
Mr. Edmund R. Gumisiriza ('98)
Dr. Donna Kabatesi ('02)
Mr. Charles Kasozi ('97)
Dr. Primo Madra ('03)
Dr. Gakenia Wamuyu Maina ('03)
Dr. Sophia Mukasa-Monico ('96)
Dr. Joshua Musinguzi ('02)
Mr. John Onen ('97)
Dr. Elizeus Rutebemberwa ('04)
Dr. Winifred Wafula ('05)

Ukraine

Dr. Tetyana Blikhar ('95)
Dr. Olena Ivanivna Martynyuk ('96)

United Arab Emirates

Dr. Hajer Al Hosani ('99)
Dr. Hissa Al Massoud ('99)

Venezuela

Ms. Lisbelia Perez ('99)

Vietnam

Prof. Tam Thanh Bui ('97)
Dr. Nguyen Mai Anh ('03)
Dr. Mai Thu Hien ('02)
Dr. Tuan Kim Do ('04)
Dr. Le Van Duc ('01)
Dr. Mai Hoa Do ('97)
Dr. Phung Duc Nhat ('05)
Dr. Pham Hoang Yen ('03)
Dr. Tran Nhu Nguyen ('03)
Dr. Van Nhu Ha ('98)
Dr. Le Thanh Hai ('01)

Dr. Liem Nguyen-Dinh ('00)
Dr. Vu Khac Luong ('96)
Ms. Ngan Nguyen Le ('99)
Dr. Binh Hoa Nguyen ('00)
Dr. Thi Ngoc Hanh Nguyen ('99)
Ms. Nguyen Thien Huong ('99)
Dr. Nguyen Bich Ngoc ('02)
Dr. Nguyen Dinh Tuan ('01)
Ms. Nguyen Thi Thu Hong ('02)
Ms. Phuong Lan Pham ('98)
Dr. Ton That Thanh ('05)
Dr. Tran Thi Thanh Nhan ('02)
Dr. Tuong Van Phan ('97)
Dr. Truong Thi Ngoc Dieu ('02)

Zambia

Mr. Harry Mussa Banda ('02)
Dr. Chisala Chabala ('03)
Ms. Catherine Chenda ('04)
Dr. Welani Chilengwe ('04)
Ms. Grace Cecilia Kahenya ('02)
Dr. Velepi C. Mtonga ('05)
Mr. Michael Musonda Nguluta ('03)
Ms. Ireen Silweya ('00)
Ms. Ruth Bwalya Tembwe ('01)
Ms. Fales Mwamba Zulu ('03)

Zimbabwe

Dr. Davies Dhlakama ('93)
Dr. Anglebert Mbengwa ('99)